

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		(
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5		1				
6		1				
7		1				
8		1				
9		1				
10		1				
11		1				
12		1				
13		2				
14		1				
15		1				
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TOTAL IND.	2		1		1	
TOTAL DEP.	19					
TOTAL CLAIMS	18	██████	██████	██████	██████	██████

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.			1		1	
TOTAL DEP.					1	
TOTAL CLAIMS		██████	██████	██████	██████	██████